



SCHOLARSHIP APPLICATION FORM

ADMINISTRATION AND REGULATIONS

1. The Ontario Simmental Association and scholarship committee, whose interpretation of the Regulations will be final and will administer the scholarship Plan.
2. The scholarship will be for one academic year, in an amount of up to \$1000.00 and paid directly to the successful applicant. There are no restrictions on the amount or number of scholarships held or the number of times a student may apply. The Ontario Simmental Association reserves the right to alter or discontinue the Scholarship Plan at any time.
3. Qualifying Educational Institutions are:

Canadian and Foreign Universities and Colleges recognized by the Association of Canadian Universities and Colleges and Canadian Community Colleges including Institutions of Technology and similar Institutions controlled by or under the supervision of Provincial Departments of Education.
4. Applicants are welcome to apply multiple times for the scholarship but may only be awarded the scholarship once.

A. GENERAL INFORMATION

Name of Applicant: _____

Address: _____

City: _____ Postal Code: _____

Phone No: _____ Email: _____

Date and Year of Birth: _____

B. EDUCATION AND CAREER INFORMATION

What level of education are you presently enrolled in: _____

2) Post Secondary Educational Institution you plan to attend: _____

Program you plan to attend: _____

What year will you attend this program: _____

3) Have you currently received any other scholarships and /or bursaries?

If yes, please list the source and the amount.: _____

C: EXPENSES

2) Applicants estimated annual expenses: _____

Tuition fees: _____

Room & Board: _____

Books: _____

Travel: _____

Personal & Other: _____

TOTAL: _____

3) Method of Financing: _____

Personal Savings: _____

From parents/guardians: _____

From friends & relatives: _____

Spouse's earnings (if applicable) : _____

Scholarships, bursaries, loans, etc. : _____

Other sources: _____

TOTAL:

D. Junior Program Involvement

1) Are you currently a YCSA Member?

2) Are you currently a 4-H Member?

3) Outline your previous involvement in the YCSA and 4-H programs.

4) Outline your involvement in your community.

5) How do you/your family use Simmental genetics within your operation?

E. DECLARATION OF APPLICANT

I DECLARE THAT TO THE BEST OF MY KNOWLEDGE ALL INFORMATION CONTAINED IN THIS APPLICATION IS TRUE AND CORRECT.

DATE: _____

SIGNATURE OF APPLICANT: _____

SIGNATURE OF WITNESS: _____

COMPLETED APPLICATION FORM (Please type or print)

MUST BE RECEIVED BY OCTOBER 1

Send completed forms to:
Ontario Simmental Association
7739 Lakeshore Rd, Lambton Shores, ON, N0N 1J3
OR:
memberservices.osa@gmail.com